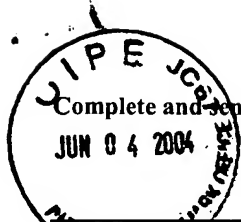


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Complete and send this form, together with applicable fee(s), to: Mail

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000026574 7590 03/04/2004

SCHIFF HARDIN, LLP
 PATENT DEPARTMENT
 6600 SEARS TOWER
 CHICAGO, IL 60606-6473

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Brett A. Valiquet	(Depositor's name)
<i>Brett A. Valiquet</i>	(Signature)
June 1, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/614,476	11/03/2003	Joachim Jauert	P03,0219	7805

TITLE OF INVENTION: ARRANGEMENT FOR PRINTING A PRINT IMAGE HAVING REGIONS WITH DIFFERENT PRINT IMAGE RESOLUTION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	06/04/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
HAMDAN, WASSEEM H	2854	400-120010

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Schiff Hardin LLP
 2
 3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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June 1, 2004

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